



8FW  
VINSON & ELKINS L.L.P.  
2300 FIRST CITY TOWER  
1001 FANNIN STREET  
HOUSTON, TEXAS 77002-6760  
TELEPHONE (713) 758-2222  
FAX (713) 758-2346  
www.velaw.com

Chris N. Cravey  
Direct Dial (713) 758-2572  
Direct Fax (713) 615-5026  
ccravey@velaw.com

July 8, 2004

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

CERTIFICATE OF MAILING

I hereby certify that this paper or fee is being deposited on July 8, 2004, with the United States Postal Service with sufficient postage as "FIRST CLASS MAIL", addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

*Michelle Derbich*

Signature

RE: U.S. Patent Application Entitled "Bottle System Useful for Storing and Mixing Materials"  
Serial No.: 10/773,358  
Reference No.: FRU600/4-003US

Dear Sir:

Please find enclosed the following document for filing in the Patent and Trademark Office:

1. *Request for Withdrawal as Attorney or Agent and Change of Correspondence Address.*

Please acknowledge receipt of the enclosed document by date stamping the enclosed postcard and returning it to this office.

Please charge any necessary fees to Deposit Account No. 22-0365 Attn: FRU600/4-003US.

Very truly yours,

*Chris Cravey*  
Chris Cravey

Enclosures  
1703259\_1.DOC



PTO/SB/83 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

Application Number	10/773,358
Filing Date	February 6, 2004
First Named Inventor	Kathy McCurry
Art Unit	3727
Examiner Name	
Attorney Docket Number	FRU600/4-003US

**To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

Client's Request

The reasons for this request are:

**CORRESPONDENCE ADDRESS**

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

☐ Customer Number: **OR**

<input checked="" type="checkbox"/> Firm or Individual Name	Kathy McCurry				
Address	Fruit of the Earth, Inc.				
Address	2520 W. Irving Blvd., 4th Floor				
City	Irving	State	TX	Zip	75060
Country	USA				
Telephone				Fax	
Name	Chris N. Cravey				
Signature				Registration No.	47,506
Date	7-8-04			Telephone No.	(713) 758-2572

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.